

Jason Kander Secretary of State
2014 ANNUAL REGISTRATION REPORT

BUSINESS

00063218
Date Filed: 2/12/2015
Jason Kander
Missouri Secretary of State

*** SECTION 1, 3 & 4 ARE REQUIRED**

REPORT DUE BY: <u>10/31/2014</u>

00063218
VANDUSER GIN COMPANY
DENNIS MCELWRATH
801 HAMILTON
PO BOX 158
VANDUSER MO 63784

1	RENEWAL MONTH: JULY
	<input type="checkbox"/> I OPT TO CHANGE THE CORPORATION'S RENEWAL MONTH TO FOR A \$25.00 FEE
	PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: *
	801 Hamilton (Required)
	PO Box 158
	STREET
	Vanduser MO 63784
	CITY / STATE ZIP

2	If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.
	<input type="checkbox"/> The new registered agent _____ IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.
	<input type="checkbox"/> The new registered office address _____ Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

	OFFICERS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST PRESIDENT AND SECRETARY BELOW</u>	A	BOARD OF DIRECTORS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST ONE DIRECTOR BELOW</u>	B	*
3	<u>PRESIDENT</u>	McElwrath, Dennis L	<u>NAME</u>	McElwrath, Dennis L	
	STREET	705 Vanduser St	STREET	705 Vanduser St	
	CITY/STATE/ZIP	Vanduser MO 63784	CITY/STATE/ZIP	Vanduser MO 63784	
	<u>SECRETARY</u>	Payne Lauder, Vickie L	<u>NAME</u>	Yelton, James	
	STREET	6755 County Rd 414	STREET	153	
	CITY/STATE/ZIP	Puxico MO 63960	CITY/STATE/ZIP	Glen Rock PA 17327	
	STREET		<u>NAME</u>	Ueland, Abraham	
	CITY/STATE/ZIP		STREET	705 Vanduser st	
	STREET		CITY/STATE/ZIP	Vanduser MO 63784	
	CITY/STATE/ZIP		<u>NAME</u>	McElwrath, Dennis J	
		STREET	24792 State Hwy 153		
		CITY/STATE/ZIP	Holcomb MO 63852		
NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED					

4	The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 576.060 RSMo. Photocopy or stamped signature not acceptable.		*
	Authorized party or officer sign here	<u>Vickie Payne Lauder</u> (Required)	
	Please print name and title of signer:	<u>Vickie Payne Lauder</u> / <u>Secretary</u> NAME TITLE	

REGISTRATION REPORT FEE IS: __ \$20.00 If filed on or before 10/31/2014 __ \$35.00 If filed on or before 11/30/2014 __ \$50.00 If filed on or before 12/31/2014 __ \$65.00 If filed on or before 1/31/2015 ADD AN ADDITIONAL \$25.00 FEE IF CHANGING THE RENEWAL MONTH.

**WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW
IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION
PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE**

E-MAIL ADDRESS (OPTIONAL): vginco@cablerocket.com

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	OFFICERS (Continued)	BOARD OF DIRECTORS (Continued)
	NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE).	NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE).
3	- STREET CITY/STATE/ZIP	<u>DIR.</u> STREET CITY/STATE/ZIP Payne Lauder, Vickie 6755 County rd 414 Puxico MO 63960